

ANNUAL SUBRECIPIENT CONTRACT DETAIL
BY PARENT
FOR THE FISCAL YEAR ENDED 6/30/05

PARENT NAME

Shelbyville

Parent Record #

1854

VENDOR NAME	REF DOC NUMBER	PAYEE NAME	ALLOT CODE	TRANS CODE	TYPE	EFFECT. DAT	EXPEND AMOUNT
SHELBYVILLE	Z03014145	CITY OF SHELBYVILLE	49400	103	D	2/1/2005	6,880.00
Summary for 'REF DOC NUMBER' = Z03014145 (1 detail record)							
Total for Z03014145							6,880.00

VENDOR NAME	REF DOC NUMBER	PAYEE NAME	ALLOT CODE	TRANS CODE	TYPE	EFFECT. DAT	EXPEND AMOUNT
SHELBYVILLE	Z05023900	CITY OF SHELBYVILLE	49400	450	G	6/30/2005	7,500.00
Summary for 'REF DOC NUMBER' = Z05023900 (1 detail record)							
Total for Z05023900							7,500.00